

Instructions:

1. Type or print with ball point pen.
2. Use a separate form for each address.
3. Fill out form completely as indicated.
4. When this application is validated it becomes the plumbing permit & will be returned to you.

CITY OF WEST ALLIS**PLUMBING PERMIT APPLICATION**

Plumbing Inspection Division
7525 W. Greenfield Ave.
West Allis, WI 53214
Tele. (414)302-8400
bldginsp@westalliswi.gov



Inspector Office Hrs. 8-9am & 1-2pm
Phone: 302-8413

Address:

JOB ADDRESS

SUITE/UNIT #

CONTRACTOR JOB NO.

CONTRACTOR SPECIAL WORK COMMENTS. (I.e., location on premises or other pertinent information).

PLUMBERS BUSINESS NAME

PHONE NO.

OWNER OF PREMISES

PHONE NO.

ADDRESS

FAX NO.

ADDRESS

CITY/STATE/ZIP

CITY/STATE/ZIP

MASTER PLUMBER CELL PHONE

E-MAIL

DESCRIPTION OF WORK

CLASS OF WORK☐ ALTER/REMODEL☐ NEW CONSTRUCTION☐ ADDITION☐ LICENSE/ORDERS/OCCUPANCY # _____**USE OF PROPERTY**☐ 1 OR 2 FAMILY☐ COMMERCIAL☐ MULTI-FAMILY☐ TAX EXEMPT

By the signature hereafter, the master plumber hereby agrees the work authorized by the issuance of this plumbing permit will be installed in a safe and workman like manner and in accordance with the plumbing rules and regulations prescribed by the City of West Allis Code, the Milwaukee Metropolitan Sewerage District Rules (MMSD) and State of Wisconsin Codes and Statutes. Further, the issuance of this plumbing permit includes review and correction by the Master Plumber of illegal cross-connections (see State of WI Adm. Code Sections SPS 382.41 and NR 811.09). By signing this permit application, it is understood that a contract exists between the owner or owner's agent and the City of West Allis, guaranteeing the right to enter for all required inspections and investigations. Applicant is obligated to ensure final inspection is made.

Master Plumbers Name (Type/Print)_____
Master Plumbers Signature_____
State of WI License / Certification #_____
Date

NOTICE: A Plumbing Permit becomes null and void if work or construction authorized is NOT commenced within 120 days of issuance, or if construction or work is suspended or abandoned for a period of 120 days at any time after the work has commenced. Before such work can be recommenced, a new permit shall be obtained. A written request from the permit holder prior to termination may extend a plumbing permit up to an additional 120 days. **REFUND OF FEES:** That portion in excess of \$100 is eligible to be refunded to the permit holder for work not yet started when a refund request is made in writing and received in the Building Inspection office prior to permit termination.

Plan Approval (If Required) # _____

PERMIT FEES

Complete the worksheet (next page) to determine the fee amount.

TOTAL DUE

\$

Official Use Only - Permit Issued

Insp. Comments/Conditions

☐ FINAL APPROVAL

APPROVAL DATE: _____

BY: _____

Date Stamp

Approved for processing by:

Issue Date:

Permit #:

Key #:

CITY OF WEST ALLIS PLUMBING PERMIT FEE WORKSHEET												
A.	Affidavit Permit - 1 or 2 family use properties only, for <u>single fixture or appliance</u> replacement installation. This must be the only work covered by this permit. No inspection is required, however, contractor work may be checked by the inspector. (BASE FEE WAIVED)							Total Due \$50.00				
B. Base Fee	NOT required on affidavit permit. Applied to all other permits unless noted. The fee includes: State of WI & federally mandated cross-connection inspection & storm management inspection(s). <div> <input type="checkbox"/> 1or2 Fam. Addn/Alter. @ \$75.00 <input type="checkbox"/> Multi-Family Bldg Addn or Alt @ \$75 <input type="checkbox"/> Non-Residential Addn or Alteration \$75 <input type="checkbox"/> 1or2 Fam. New Bldg @ \$150.00 <input type="checkbox"/> Multi-Family New Bldg. @ \$150 PLUS # of Res Units @ \$5 unit <input type="checkbox"/> Non-Residential - New \$150 </div>							\$				
All Other Permit Types Complete Sections Below												
C. Fixture(s)/Fixture Fee	Qty. Column A				Qty. Column B				C. Fixture(s)/Fixture Fee			
	Air Admittance Valve (Test Required)				Manhole							
	Backflow Device/Assembly				Roof Drains/Conductors							
	Bath Tub				Service Sink							
	Catch Basin				Shower							
	Dishwasher				Sinks (type):							
	Drink Dispenser <input type="checkbox"/> Soda <input type="checkbox"/> Coffee <input type="checkbox"/> Other											
	Drinking Fountain				Site/Funnel Drains <input type="checkbox"/> Sanitary <input type="checkbox"/> Storm							
	Floor Drain				Sumps <input type="checkbox"/> Sanitary <input type="checkbox"/> Storm							
	Garbage Disposal				Urinal							
	Grease Interceptor				Washer Connection							
	Hosebibbs				Water Closet							
	Ice Machine/Chest				Water Heater - Electric							
	Laundry Tray				Water Heater - Gas (Code compliant gas valve required)							
	Lavatory				Water Treatment/Filters							
	Other (Explain):				Other (Explain):							
	Total Fixt.-COLUMN I				Total Fixt.-COLUMN II							
	<div> <div>Qty.</div> <div>10 or more non-residential fixtures will require City of West Allis Plumbing Plan Approval Prior to Permit Issuance</div> <div>FEE</div> </div>											
	<div> <div>Qty.</div> <div>Fixture Count (Total # of fixtures listed in Columns A & B (above). @ \$15/Fixture</div> <div></div> </div>											
D. Other Fees	Water Distribution Piping <input type="checkbox"/> New <input type="checkbox"/> Replacement When Additional Demand is added, Water Calculations are Required \$75.00							D. Other Fees				
	New Connections to Main: <input type="checkbox"/> Water <input type="checkbox"/> Sanitary <input type="checkbox"/> Storm \$75.00/ea.											
	Laterals - New or Repair _____ ft. Water _____ ft. Sanitary _____ ft. Storm \$75.00/100' or fraction thereof											
	Building Drains/Sewer - New or Repairs _____ ft. Sanitary _____ ft. Storm \$75.00/100' or fraction thereof											
	Well Operation Permit - Renewal (Base Fee waived) \$75.00											
	Well Abandonment Permit (Copy of DNR Form 3300-5B Required) Base Fee Waived \$75.00											
	Capping/Terminating <input type="checkbox"/> Water <input type="checkbox"/> Sanitary <input type="checkbox"/> Storm <input type="checkbox"/> Fixtures \$75.00/ea.											
	Code Corrections - (Letter # _____) Base Fee Waived \$75.00/min.											
	Inspections (Base Fee Waived)				Reinspection - \$75.00							
					Request for Overtime Inspection - \$200.00 Min.							
Special Insp. w/written Report \$250.00												
Failure to Call for Inspections				\$75.00 Min.								
E. Total	Total Due Sum of Fees from Secs B, C & D Above							E. Total				
	Triple Permit Fees "Total Due" (above) x 3 (\$300 minimum)											